

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Studio A Kitchen & Bath, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 83-1490286

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

1698 S. Elmhurst Rd Suite 110  
Mount Prospect, IL 60056

Number, Street, City, State & ZIP Code

Cook

County

c/o Agnieszka Bzura  
1116 S. Courtland Ave, Unit 202  
Park Ridge, IL 60068

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

600 W. Talcott Road, unit 101 Park Ridge, IL 60068

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) https://studioakitchenandbath.com/

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **Studio A Kitchen & Bath, Inc.** Case number (if known) \_\_\_\_\_  
Name

**7. Describe debtor's business**

*A. Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the above

*B. Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

*C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.*

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

*Check one:*

- ☒ Chapter 7  
☐ Chapter 9  
☐ Chapter 11. *Check all that apply:*

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- ☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.  
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **Studio A Kitchen & Bath, Inc.** Case number (if known) \_\_\_\_\_  
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No  
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

11. Why is the case filed in this district?
- Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☒ No  
☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_
- Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

**Statistical and administrative information**

13. Debtor's estimation of available funds
- Check one:
- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- |                                          |                                        |                                            |
|------------------------------------------|----------------------------------------|--------------------------------------------|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |                                        |                                            |

15. Estimated Assets
- |                                                    |                                                        |                                                          |
|----------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------|
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million    | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000      | <input type="checkbox"/> \$10,000,001 - \$50 million   | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000     | <input type="checkbox"/> \$50,000,001 - \$100 million  | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million   | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion          |

16. Estimated liabilities
- |                                         |                                                     |                                                      |
|-----------------------------------------|-----------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|-----------------------------------------|-----------------------------------------------------|------------------------------------------------------|

Debtor	<b>Studio A Kitchen &amp; Bath, Inc.</b>	Case number (if known)
Name		
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor **Studio A Kitchen & Bath, Inc.** Case number (if known) \_\_\_\_\_  
Name

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 6, 2023**  
MM / DD / YYYY

**X /s/ Agnieszka Bzura**  
Signature of authorized representative of debtor  
  
Title **President**

**Agnieszka Bzura**  
Printed name

**18. Signature of attorney**

**X /s/ Julia Jensen Smolka**  
Signature of attorney for debtor

Date **June 6, 2023**  
MM / DD / YYYY

**Julia Jensen Smolka 6272466**  
Printed name

**Robbins DiMonte, Ltd.**  
Firm name

**216 Higgins Road**  
**Park Ridge, IL 60068**  
Number, Street, City, State & ZIP Code

Contact phone **(847) 698-9600** Email address \_\_\_\_\_

**6272466 IL**  
Bar number and State

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 7

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17. Declaration and signature of authorized representative of debtor

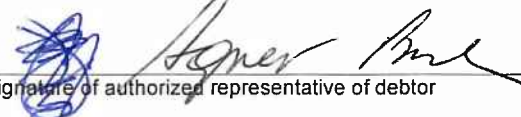
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 6/6/23  
MM / DD / YYYY

X   
Signature of authorized representative of debtor

Agnieszka Bzura  
Printed name

Title President

18. Signature of attorney

X   
Signature of attorney for debtor

Date 6/6/23  
MM / DD / YYYY

Julia Jensen Smolka 6272466  
Printed name

Robbins DiMonte, Ltd.  
Firm name

216 Higgins Road  
Park Ridge, IL 60068  
Number, Street, City, State & ZIP Code

Contact phone (847) 698-9600

Email address J.smolka@robbinsdimonte.com

6272466 IL  
Bar number and State

**Fill in this information to identify the case:**

Debtor name Studio A Kitchen & Bath, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 6, 2023

X /s/ Agnieszka Bzura

Signature of individual signing on behalf of debtor

Agnieszka Bzura

Printed name

President

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name Studio A Kitchen & Bath, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

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I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

6/6/23

X

Signature of individual signing on behalf of debtor

Agnieszka Bzura

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Studio A Kitchen & Bath, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 206Sum

## Summary of Assets and Liabilities for Non-Individuals

12/15

### Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **11,532.50**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **11,532.50**

### Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **500,000.00**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **9,200.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **339,810.08**

4. **Total liabilities** .....  
Lines 2 + 3a + 3b

\$ **849,010.08**

## Fill in this information to identify the case:

Debtor name Studio A Kitchen & Bath, Inc.United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

## 1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Parkway BankChecking4422\$900.004. **Other cash equivalents** (*Identify all*)5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$900.00**Part 2: Deposits and Prepayments**

## 6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Lease security deposit\$1,132.508. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$1,132.50

Debtor Studio A Kitchen & Bath, Inc. Case number (If known) \_\_\_\_\_  
Name

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale Miscellaneous cabinetry and cabinetry display inserts		\$0.00		\$1,500.00

22. Other inventory or supplies

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

**\$1,500.00**

24. Is any of the property listed in Part 5 perishable?

- ☒ No  
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

Debtor Studio A Kitchen & Bath, Inc. Case number (If known) \_\_\_\_\_  
Name

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture 3 Desk, 3 chairs, 2 computers, coffee machine, printer, mini fridge, microwave, beverage fridge	\$0.00		\$4,000.00
	Displays	\$0.00		\$3,000.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$7,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No  
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Hand tools, table saw, hand saw.	\$0.00		\$1,000.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$1,000.00

Debtor Studio A Kitchen & Bath, Inc. Case number (If known) \_\_\_\_\_  
Name

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor Studio A Kitchen & Bath, Inc. Case number (If known) \_\_\_\_\_  
Name

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$900.00</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$1,132.50</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$1,500.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$7,000.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$1,000.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$11,532.50</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$11,532.50</b>

## Case number (if known)

page 1 of 1

Fill in this information to identify the case:

Debtor name **Studio A Kitchen & Bath, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Illinois Department of Revenue Bankruptcy Unit PO Box 19035 Springfield, IL 62794</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,200.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred _____	Basis for the claim: <b>sales tax</b>		
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>American Express PO Box 297871 Fort Lauderdale, FL 33329</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$15,000.00</b>
	Date(s) debt was incurred _____	Basis for the claim: <b>Business Credit Card</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <b>Bank of America PO Box 982238 El Paso, TX 79998</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$14,000.00</b>
	Date(s) debt was incurred _____	Basis for the claim: <b>Business Credit Card</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Studio A Kitchen & Bath, Inc.**  
Name

Case number (if known)

3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Blue Vine Fund</b> <b>30 Montgomery Street</b> <b>Jersey City, NJ 07302</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$34,800.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Capital One</b> <b>PO Box 31293</b> <b>Salt Lake City, UT 84131</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,199.00</b>
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Capital One Spark</b> <b>PO Box 31293</b> <b>Salt Lake City, UT 84131</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>business credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Ink</b> <b>National Bank by Mail</b> <b>PO Box 6185</b> <b>Westerville, OH 43086</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,000.00</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Citi Costco</b> <b>PO Box 7900057</b> <b>Saint Louis, MO 63179</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,500.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Doug and Kristina Meyer</b> <b>c/o Daniel Hogan, McCabe &amp; Hogan</b> <b>19 S. Bothwell St, Suite 200</b> <b>Palatine, IL 60067</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>complaint on cabinetry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$18,368.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>First American Payment Systems, LP</b> <b>Attn: Collection Manager</b> <b>100 Throckmorton Street, Suite 1800</b> <b>Fort Worth, TX 76102</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit card processing account.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$589.65</b>

Debtor **Studio A Kitchen & Bath, Inc.**  
Name

Case number (if known)

3.10	<b>Nonpriority creditor's name and mailing address</b> <b>I.C. System, Inc.</b> <b>PO Box 64378</b> <b>Saint Paul, MN 55164</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$391.74</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Mulligan Funding, LLC</b> <b>4715 Viewridge Avenue, Suite 100</b> <b>San Diego, CA 92123</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Business loan agreement</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$98,113.61</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>ODK Capital, LLC</b> <b>4700 W. Daybreak Pkwy, Suite 200</b> <b>UT 84009</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Business Loan Agreement</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24,094.00</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Parkway Bank</b> <b>4800 N. Harlem Ave</b> <b>Harwood Heights, IL 60706</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7889</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>money loaned. UCC on file</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$43,137.00</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Parkway Bank</b> <b>4800 N. Harlem Ave</b> <b>Harwood Heights, IL 60706</b>  Date(s) debt was incurred ____ Last 4 digits of account number <u>7900</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Business loan agreement</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$22,335.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Vital Cap Fund</b> <b>48 Wall Street, Suite 1013</b> <b>New York, NY 10005</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Business Loan Agreement</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44,282.08</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Babcock Scott &amp; Babcock, P.C.</b> <b>Attn: Jeffrey R. Handy</b> <b>370 E. South Temple, 4th Floor</b> <b>Salt Lake City, UT 84111</b>	Line <u>3.11</u>  <input type="checkbox"/> Not listed. Explain ____	—

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known) \_\_\_\_\_

Name

Name and mailing address

On which line in Part1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

4.2 **Cure Payment Recovery Solutions**  
**Attn: Susan Milopsky**  
**1490 William Floyd Pkwy, Suite 102**  
**Yaphank, NY 11967**

Line **3.15**

**0803**

☐ Not listed. Explain \_\_\_\_\_

4.3 **Sheryl A. Fyock**  
**Latimer Levay Fyock, LLC**  
**55 W. Monroe, Suite 1100**  
**Chicago, IL 60603**

Line **3.13**

—

☐ Not listed. Explain \_\_\_\_\_

4.4 **Sheryl A. Fyock**  
**Latimer Levay Fyock, LLC**  
**55 W. Monroe, Suite 1100**  
**Chicago, IL 60603**

Line **3.14**

—

☐ Not listed. Explain \_\_\_\_\_

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

**Total of claim amounts**

5a. \$ **9,200.00**

5b. + \$ **339,810.08**

5c. \$ **349,010.08**

Fill in this information to identify the case:

Debtor name **Studio A Kitchen & Bath, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest  
  
State the term remaining

**Lease on showroom space at 600 W. Talcott, Park Ridge. Goes through May 31, 2023. 6 days**

List the contract number of any government contract \_\_\_\_\_

**600 Talcott, LLC  
600 W. Talcott  
Park Ridge, IL 60068**

Fill in this information to identify the case:

Debtor name **Studio A Kitchen & Bath, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 206H

## Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name		Mailing Address	Name	Check all schedules that apply:
2.1	Agnieszka Bzura	116 Courtland Ave, Unit 2 Park Ridge, IL 60068 personal guaranty	American Express	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.1</u> <input type="checkbox"/> G _____
2.2	Agnieszka Bzura	116 Courtland Ave, Unit 2 Park Ridge, IL 60068	Bank of America	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
2.3	Agnieszka Bzura	116 Courtland Ave, Unit 2 Park Ridge, IL 60068	Blue Vine Fund	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.3</u> <input type="checkbox"/> G _____
2.4	Agnieszka Bzura	116 Courtland Ave, Unit 2 Park Ridge, IL 60068	U.S. Small Business Administration	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5	Agnieszka Bzura	116 Courtland Ave, Unit 2 Park Ridge, IL 60068	Parkway Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.13</u> <input type="checkbox"/> G _____

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known)

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Parkway Bank</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.14</u> <input type="checkbox"/> G _____
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2.7	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Vital Cap Fund</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.15</u> <input type="checkbox"/> G _____
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2.8	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>ODK Capital, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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2.9	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Illinois Department of Revenue</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.1</u> <input type="checkbox"/> G _____
-----	------------------------	-----------------------------------------------------------	-------------------------------------------	----------------------------------------------------------------------------------------------------------------------------

2.10	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Mulligan Funding, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.11	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Capital One</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.4</u> <input type="checkbox"/> G _____
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2.12	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Capital One Spark</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
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2.13	<b>Agnieszka Bzura</b>	<b>116 Courtland Ave, Unit 2 Park Ridge, IL 60068</b>	<b>Chase Ink</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
------	------------------------	-----------------------------------------------------------	------------------	----------------------------------------------------------------------------------------------------------------------------

Debtor Studio A Kitchen & Bath, Inc. Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14 **Agnieszka Bzura** **116 Courtland Ave, Unit 2**  
**Park Ridge, IL 60068**

**Citi Costco**

☐ D \_\_\_\_\_

☒ E/F 3.7

☐ G \_\_\_\_\_

**Fill in this information to identify the case:**

Debtor name Studio A Kitchen & Bath, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**

**Sources of revenue**  
Check all that apply

**Gross revenue**  
(before deductions and exclusions)

**From the beginning of the fiscal year to filing date:**  
From 1/01/2023 to Filing Date

☒ Operating a business  
☐ Other \_\_\_\_\_

\$32,211.00

**For prior year:**  
From 1/01/2022 to 12/31/2022

☒ Operating a business  
☐ Other \_\_\_\_\_

\$637,214.00

**For year before that:**  
From 1/01/2021 to 12/31/2021

☒ Operating a business  
☐ Other \_\_\_\_\_

\$1,421,000.00

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known) \_\_\_\_\_

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>Illinois Department of Revenue Bankruptcy Unit PO Box 19035 Springfield, IL 62794</b>	<b>\$3000 3/6/23; \$3000 4/13/23; \$2000 4/26/23</b>	<b>\$8,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>payment of sales taxes made by Agnes out of personal funds.</b>
3.2. <b>See Bank Statement Attached as Exhibit A</b>		<b>\$0.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>Agnieszka Bzura 116 Courtland Ave, Unit 2 Park Ridge, IL 60068 Owner</b>		<b>\$64,000.00</b>	<b>Salary</b>

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Mulligan Funding, LLC v Debtor and Agnieszka Bzura 22 0906955	Breach of Contract, Collection-Judgment entered of \$98,113.61	District Court Utah, Salt Lake City 450 S. State Street PO Box 1860 Salt Lake City, UT 84114-1860	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2.	Parkway Bank and Trust Company v. Studio A Kitchen & Bath, Inc. and Agnieszka Bzura 2023-L-002547	Breach of Contract	Circuit Court of Cook County Richard J. Daley Center 50 W. Washington Street Chicago, IL 60602	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	Jesuit University Ignatianum Mikolaja Kopernika, 26 31-501 Krakow Lesser Poland Voivodeship, Poland	Cash	7/16/2021	\$5,000.00
	Recipients relationship to debtor none			
9.2.	Jesuit University Ignatianum Mikolaja Kopernika, 26 31-501 Krakow Lesser Poland Voivodeship, Poland	Cash	9/13/2021	\$12,000.00
	Recipients relationship to debtor none			
9.3.	Jesuit University Ignatianum Mikolaja Kopernika, 26 31-501 Krakow Lesser Poland Voivodeship, Poland	cash	10/12/2021	\$5,000.00
	Recipients relationship to debtor none			

**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known)

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Robbins DiMonte, Ltd. 216 W. Higgins Road Park Ridge, IL 60068		12/23/2022	\$4,500.00
Email or website address			
Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Misc Craigs list	Sold cabinetry displays from former leased space	8/22-10/22	\$2,500.00
Relationship to debtor none			

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known) \_\_\_\_\_

☐ Does not apply**Address****Dates of occupancy  
From-To**14.1. **1698 S. Elmhurst Rd  
Mount Prospect, IL 60056****9/18-9/22****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

**Facility name and address****Nature of the business operation, including type of services  
the debtor provides****If debtor provides meals  
and housing, number of  
patients in debtor's care****Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	<b>Financial Institution name and Address</b>	<b>Last 4 digits of account number</b>	<b>Type of account or instrument</b>	<b>Date account was closed, sold, moved, or transferred</b>	<b>Last balance before closing or transfer</b>
18.1.	<b>Associated Bank 1301 Waukeegan Road Glenview, IL 60025</b>	<b>XXXX-2087</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	<b>July of 2022</b>	<b>\$0.00</b>
18.2.	<b>Bank of America</b>	<b>XXXX-9135</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	<b>September of 2022</b>	<b>\$0.00</b>

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known) \_\_\_\_\_

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.3. Chase Bank	XXXX-8535	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	May, 2023	\$0.00
18.4. Bank of America	XXXX-2244	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___		\$0.00

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
-----------------------------------------	-------------------------------------------	-----------------------------	----------------------------

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
---------------------------	-----------------------------------	-----------------------------	----------------------------

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known)

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
-----------------------	-------------------------------------	----------------------------------------------------------------------------------------------------------------

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Agnieszka Bzura</b> <b>1116 S. Courtland Avenue, Apt. 202</b> <b>Park Ridge, IL 60068</b>	<b>entire time</b>
26a.2. <b>Taxpol Belmont, Corp</b> <b>5421 W. Belmont</b> <b>Chicago, IL 60641</b>	<b>Annual Tax Returns, Quarterly taxes as needed. Personal Returns for owner</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---------------------------------------------------------------------

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial

Debtor **Studio A Kitchen & Bath, Inc.**

Case number (if known)

statement within 2 years before filing this case.

☒ None

**Name and address**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the inventory**

**Date of inventory**

**The dollar amount and basis (cost, market, or other basis) of each inventory**

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

**Name**

**Address**

**Position and nature of any interest**

**% of interest, if any**

**Agnieszka Bzura**

**1116 S. Courtland Avenue, Apt. 202  
Park Ridge, IL 60068**

**owner, president**

**100**

**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**

☒ No

☐ Yes. Identify below.

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

**Name and address of recipient**

**Amount of money or description and value of property**

**Dates**

**Reason for providing the value**

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

☒ No

☐ Yes. Identify below.

**Name of the parent corporation**

**Employer Identification number of the parent corporation**

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

☒ No

☐ Yes. Identify below.

**Name of the pension fund**

**Employer Identification number of the pension fund**

Debtor Studio A Kitchen & Bath, Inc.

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 6, 2023

/s/ Agnieszka Bzura

Signature of individual signing on behalf of the debtor

Agnieszka Bzura

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☒ Yes

**Fill in this information to identify the case:**

Debtor name Studio A Kitchen & Bath, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/06/23

  
Signature of individual signing on behalf of the debtor

Agnieszka Bzura  
Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No  
☐ Yes



JPMorgan Chase Bank, N.A.  
P O Box 182051  
Columbus, OH 43218 - 2051

March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] 8535

#### CUSTOMER SERVICE INFORMATION

Web site: **Chase.com**  
Service Center: **1-800-242-7338**  
Para Espanol: **1-888-622-4273**  
International Calls: **1-713-262-1679**  
We accept operator relay calls

00216344 DRE 111 211 09123 NNNNNNNNNN 1 000000000 64 0000

STUDIO A KITCHEN & BATH, INC.  
1698 S ELMHURST RD STE 110  
MOUNT PROSPECT IL 60056-5517



02163440301000000023

### Good news — we've eliminated two fees

We're no longer charging the:

- **Deposited Item Returned or Cashed Check Returned Fee** — This was a \$12 fee we charged if an item you deposited or cashed was returned unpaid. We stopped charging this fee as of **December 1, 2022**.
- **Savings Withdrawal Limit Fee** — This was a \$5 fee we charged for each withdrawal or transfer (over six) out of a Chase savings account in a monthly statement period, maximum of three fees per monthly statement period. We stopped charging this fee as of **March 19, 2023**.

We're also changing the name **Insufficient Funds Fee** to **Overdraft Fee**. There are no changes to how and when we charge this fee or the ways to avoid this fee.

As we update and remove references to these three fees, you may continue to see them listed in the Chase Mobile® app<sup>1</sup>, on chase.com and in other materials.

If you have any questions, please call us at the number listed on this statement. We accept operator relay calls.

<sup>1</sup>Chase Mobile® app is available for select mobile devices. Message and data rates may apply.

### CHECKING SUMMARY

Chase Business Complete Checking

	INSTANCES	AMOUNT
<b>Beginning Balance</b>		<b>\$13,927.47</b>
Deposits and Additions	11	29,670.80
Checks Paid	5	-9,734.49
ATM & Debit Card Withdrawals	11	-10,269.34
Electronic Withdrawals	14	-12,644.13
Other Withdrawals	1	-9,500.00
Fees	2	-49.00
<b>Ending Balance</b>	<b>44</b>	<b>\$1,401.31</b>

Your Monthly Service Fee was \$15 this statement period.



March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] 8535

### How to Avoid the Monthly Service Fee (MSF)

If you meet any of the following qualifying activities for this Chase Business Complete Checking<sup>SM</sup> account in a statement period, we will waive the \$15 MSF.

Here's the business activity we used to determine if you qualified for the MSF waiver:

- **\$2,000 Minimum Daily Ending Balance:** Your lowest daily ending balance was -\$604.07.
- **\$2,000 Chase Payment Solutions<sup>SM</sup> Activity:** \$0.00 was deposited into this account.
- **\$2,000 Chase Ink<sup>®</sup> Business Card Activity:** \$0.00 was your total Ink activity.

You can also avoid the MSF if you:

- Maintain a linked Chase Private Client Checking<sup>SM</sup> account OR
- Meet Chase Military Banking requirements

For complete details on all requirements to avoid the MSF, please review the Additional Banking Services and Fees for Business Accounts at [chase.com/business/disclosures](https://chase.com/business/disclosures) or visit a Chase branch.

## DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
03/06	Orig CO Name:Bankcard Orig ID:1752515225 Desc Date:230303 CO Entry Descr:Settlementsec:CCD Trace#:242272180672958 Eed:230306 Ind ID:628044000803794 Ind Name:Studio A Kitchen And B Tm: 0650672958Tc	\$12,586.00
03/08	Card Purchase Return 03/07 Top Knobs Branchburg NJ Card 5496	78.00
03/08	Online Transfer From Chk ...6029 Transaction#: 16772855655	2,100.00
03/10	Online Transfer From Chk ...6029 Transaction#: 16792657948	200.00
03/14	ATM Cash Deposit 03/14 1 S Northwest Hwy Park Ridge IL Card 5496	600.00
03/14	Orig CO Name:Bankcard Orig ID:1752515225 Desc Date:230313 CO Entry Descr:Settlementsec:CCD Trace#:242272184164414 Eed:230314 Ind ID:628044000803794 Ind Name:Studio A Kitchen And B Tm: 0734164414Tc	318.00
03/15	ATM Cash Deposit 03/15 1 S Northwest Hwy Park Ridge IL Card 5496	600.00
03/16	ATM Cash Deposit 03/16 1 S Northwest Hwy Park Ridge IL Card 5496	140.00
03/20	Orig CO Name:Bankcard Orig ID:1752515225 Desc Date:230317 CO Entry Descr:Settlementsec:CCD Trace#:242272182744352 Eed:230320 Ind ID:628044000803794 Ind Name:Studio A Kitchen And B Tm: 0792744352Tc	3,538.80
03/23	Card Purchase Return 03/22 Top Knobs Branchburg NJ Card 5496	10.00
03/24	Deposit 2054439141	9,500.00
<b>Total Deposits and Additions</b>		<b>\$29,670.80</b>

## CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
138 ^		03/20	\$51.00
139 ^		03/03	3,483.49
140 ^		03/01	2,600.00
141 ^		03/10	600.00
171 * ^		03/29	3,000.00
<b>Total Checks Paid</b>			<b>\$9,734.49</b>

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

\* All of your recent checks may not be on this statement, either because they haven't cleared yet or they were listed on one of your previous statements.

^ An image of this check may be available for you to view on Chase.com.



March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] 8535

## ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/01	Card Purchase With Pin 03/01 Olson's Ace Park Ridge Park Ridge IL Card 5496	\$30.09
03/01	Card Purchase With Pin 03/01 Mnrd-Mount Pros 740 E. MT Prospect IL Card 5496	354.21
03/01	Card Purchase With Pin 03/01 7-Eleven 38397 Elk Grove Vil IL Card 5496	50.71
03/02	Card Purchase 02/28 J & K Cabinetry Inc 847-7587808 IL Card 5496	5,179.32
03/02	Card Purchase 03/01 Fredriksen Fire Equipm 630-5959500 IL Card 5496	144.89
03/02	Card Purchase 03/01 Allstate *Payment 800-255-7828 IL Card 5496	438.03
03/03	Card Purchase With Pin 03/03 The Home Depot 1981 Niles IL Card 5496	36.93
03/06	Card Purchase 03/03 Trader Joe S #698 Park Ridge IL Card 5496	52.22
03/09	Card Purchase 03/07 J & K Cabinetry Inc 847-7587808 IL Card 5496	2,372.17
03/21	Card Purchase 03/20 Top Knobs Branchburg NJ Card 5496	864.21
03/23	Card Purchase 03/21 J & K Cabinetry Inc 847-7587808 IL Card 5496	746.56
Total ATM & Debit Card Withdrawals		\$10,269.34



## ATM & DEBIT CARD SUMMARY

Agnieszka Bzura Card 5496

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$10,269.34
Total Card Deposits & Credits	\$1,428.00

ATM & Debit Card Totals

Total ATM Withdrawals & Debits	\$0.00
Total Card Purchases	\$10,269.34
Total Card Deposits & Credits	\$1,428.00

## ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/01	Orig CO Name:Applecard Gsbank Orig ID:999999999 Desc Date:022823 CO Entry Descr:Payment Sec:Web Trace#:124085085308710 Eed:230301 Ind ID:21856404 Ind Name:Agnes Bzura Trn: 0605308710Tc	\$93.69
03/01	03/01 Online Transfer To Chk ...6029 Transaction#: 16711561372	500.00 Agnes
03/01	Orig CO Name:Bankcard Orig ID:1752515225 Desc Date:230228 CO Entry Descr:Mthly Feessec:CCD Trace#:242272181684587 Eed:230301 Ind ID:628044000803794 Ind Name:Studio A Kitchen And B Trn: 0601684587Tc	713.48
03/02	Orig CO Name:Applecard Gsbank Orig ID:999999999 Desc Date:030123 CO Entry Descr:Payment Sec:Web Trace#:124085085321328 Eed:230302 Ind ID:21856404 Ind Name:Agnes Bzura Trn: 0615321328Tc	500.00
03/07	Orig CO Name:Bankcard Pci Orig ID:1752515225 Desc Date:030623 CO Entry Descr:Non Complysec:CCD Trace#:021000026073883 Eed:230307 Ind ID:000000004194124 Ind Name:Studio A Kitchen And B Faps Pci Non Comp Trn: 0666073883Tc <i>Me personal Aut</i>	19.95
03/07	03/07 Online Transfer To Chk ...6029 Transaction#: 16764639997	2,500.00 Agnes
03/09	Orig CO Name:Applecard Gsbank Orig ID:999999999 Desc Date:030823 CO Entry Descr:Payment Sec:Web Trace#:124085087133683 Eed:230309 Ind ID:21856404 Ind Name:Agnes Bzura Trn: 0687133683Tc	92.76
03/10	Orig CO Name:Applecard Gsbank Orig ID:999999999 Desc Date:030923 CO Entry Descr:Payment Sec:Web Trace#:124085084223654 Eed:230310 Ind ID:21856404 Ind Name:Agnes Bzura Trn: 0694223654Tc	199.60
03/15	Orig CO Name:Irs Orig ID:3387702000 Desc Date:031523 CO Entry Descr:Usatxpymtsec:CCD Trace#:061036015801130 Eed:230315 Ind ID:225347401085636 Ind Name:Studio A Kitchen & Bat Trn: 0745801130Tc	735.50 IRS



March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] 8535

## ELECTRONIC WITHDRAWALS (continued)

DATE	DESCRIPTION	AMOUNT
03/15	Orig CO Name:IL Dept of Reven Orig ID:5555566257 Desc Date: CO Entry Descr:EDI Pymntssec:CCD Trace#:091000018886294 Eed:230315 Ind ID:23Whf000150866 Ind Name:Studio A Kitchen Bat Txp*831490286000*0112*20230331*T*1 5575\ EDI Trn: 0748886294Tc	155.75
03/16	Orig CO Name:IL Dept Empl Sec Orig ID:1363042127 Desc Date:031623 CO Entry Descr:Unempl Taxsec:CCD Trace#:071109335959001 Eed:230316 Ind ID:1576046848 Ind Name:Studio A Kitchen & Bat Txp*5058746**230331**0000000000**00 00010000**831490286\ Trn: 0755959001Tc	100.00
03/17	Orig CO Name:Applecard Gsbank Orig ID:9999999999 Desc Date:031623 CO Entry Descr:Payment Sec:Web Trace#:124085084766778 Eed:230317 Ind ID:21856404 Ind Name:Agnes Bzura Trn: 0764766778Tc	197.13
03/22	03/22 Online Transfer To Chk ...6029 Transaction#: 16889237656	700.00
03/27	Orig CO Name:Bankcard Orig ID:1752515225 Desc Date:230325 CO Entry Descr:Settlementsec:CCD Trace#:242272180563896 Eed:230327 Ind ID:628044000803794 Ind Name:Studio A Kitchen And B Trn: 0860563896Tc	6,136.27
<b>Total Electronic Withdrawals</b>		<b>\$12,644.13</b>

*Refund*

## OTHER WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/06	03/06 Withdrawal	\$9,500.00
<b>Total Other Withdrawals</b>		<b>\$9,500.00</b>

## FEES

DATE	DESCRIPTION	AMOUNT
03/13	Overdraft Fee For Check #141 IN The Amount of \$600.00	\$34.00
03/31	Monthly Service Fee	15.00
<b>Total Fees</b>		<b>\$49.00</b>

## DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
03/01	\$9,585.29	03/10	-570.07	03/21	2,489.14
03/02	3,323.05	03/13	-604.07	03/22	1,789.14
03/03	-197.37	03/14	313.93	03/23	1,052.58
03/06	2,836.41	03/15	22.68	03/24	10,552.58
03/07	316.46	03/16	62.68	03/27	4,416.31
03/08	2,494.46	03/17	-134.45	03/29	1,416.31
03/09	29.53	03/20	3,353.35	03/31	1,401.31



March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] 8535

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**IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:**

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

**For personal accounts only:** We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

**For business accounts,** see your deposit account agreement or other applicable agreements that govern your account for details.

**IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS:** Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

**JPMorgan Chase Bank, N.A. Member FDIC**

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March 01, 2023 through March 31, 2023  
Account Number: [REDACTED] **8535**

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B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Studio A Kitchen & Bath, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>4,500.00</b>
Prior to the filing of this statement I have received .....	\$	<b>4,500.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- c. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Defense of any Motions to Modify Automatic Stay; Prosecutions of any Motions to Avoid Liens; Negotiating and Documenting any Reaffirmation Agreement; Representation of Client at any examination under Bankruptcy Rule 2004, or with any negotiations with the United States Trustee or the Chapter 7 trustee, defenses of any adversaries; and Motions to Convert the Matter to Another Chapter**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**June 6, 2023**

*Date*

**/s/ Julia Jensen Smolka**

**Julia Jensen Smolka 6272466**

*Signature of Attorney*

**Robbins DiMonte, Ltd.**

**216 Higgins Road**

**Park Ridge, IL 60068**

**(847) 698-9600 Fax: (847) 698-9623**

*Name of law firm*

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Studio A Kitchen & Bath, Inc.

Debtor(s)

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Chapter

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Prior to the filing of this statement I have received .....	\$	<u>4,500.00</u>
Balance Due .....	\$	<u>0.00</u>

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☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

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- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- c. [Other provisions as needed]

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Date

6/6/23

Julia Jensen Smolka 6272466

*Signature of Attorney*

**Robbins DiMonte, Ltd.**

**216 Higgins Road**

**Park Ridge, IL 60068**

**(847) 698-9600 Fax: (847) 698-9623**

*Name of law firm*

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Studio A Kitchen & Bath, Inc.** Case No. \_\_\_\_\_  
Debtor(s) Chapter **7**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: **21**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **June 6, 2023** **/s/ Agnieszka Bzura**  
**Agnieszka Bzura/President**  
Signer/Title

**United States Bankruptcy Court  
Northern District of Illinois**

In re Studio A Kitchen & Bath, Inc.

Debtor(s)

Case No.

Chapter

7

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: 21

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date:

6/6/23



**Agnieszka Bzura/President**  
Signer/Title

600 Talcott, LLC  
600 W. Talcott  
Park Ridge, IL 60068

Agnieszka Bzura  
116 Courtland Ave, Unit 2  
Park Ridge, IL 60068

American Express  
PO Box 297871  
Fort Lauderdale, FL 33329

Babcock Scott & Babcock, P.C.  
Attn: Jeffrey R. Handy  
370 E. South Temple, 4th Floor  
Salt Lake City, UT 84111

Bank of America  
PO Box 982238  
El Paso, TX 79998

Blue Vine Fund  
30 Montgomery Street  
Jersey City, NJ 07302

Capital One  
PO Box 31293  
Salt Lake City, UT 84131

Capital One Spark  
PO Box 31293  
Salt Lake City, UT 84131

Chase Ink  
National Bank by Mail  
PO Box 6185  
Westerville, OH 43086

Citi Costco  
PO Box 7900057  
Saint Louis, MO 63179

Cure Payment Recovery Solutions  
Attn: Susan Milopsky  
1490 William Floyd Pkwy, Suite 102  
Yaphank, NY 11967

Doug and Kristina Meyer  
c/o Daniel Hogan, McCabe & Hogan  
19 S. Bothwell St, Suite 200  
Palatine, IL 60067

First American Payment Systems, LP  
Attn: Collection Manager  
100 Throckmorton Street, Suite 1800  
Fort Worth, TX 76102

I.C. System, Inc.  
PO Box 64378  
Saint Paul, MN 55164

Illinois Department of Revenue  
Bankruptcy Unit  
PO Box 19035  
Springfield, IL 62794

Mulligan Funding, LLC  
4715 Viewridge Avenue, Suite 100  
San Diego, CA 92123

ODK Capital, LLC  
4700 W. Daybreak Pkwy, Suite 200  
UT 84009

Parkway Bank  
4800 N. Harlem Ave  
Harwood Heights, IL 60706

Sheryl A. Fyock  
Latimer Levay Fyock, LLC  
55 W. Monroe, Suite 1100  
Chicago, IL 60603

U.S. Small Business Administration  
1545 Hawkins Blvd. Suite 202  
El Paso, TX 79925

Vital Cap Fund  
48 Wall Street, Suite 1013  
New York, NY 10005

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Studio A Kitchen & Bath, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Studio A Kitchen & Bath, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

**June 6, 2023**

Date

**/s/ Julia Jensen Smolka**

**Julia Jensen Smolka 6272466**

Signature of Attorney or Litigant

Counsel for **Studio A Kitchen & Bath, Inc.**

**Robbins DiMonte, Ltd.**

**216 Higgins Road**

**Park Ridge, IL 60068**

**(847) 698-9600 Fax:(847) 698-9623**

**United States Bankruptcy Court  
Northern District of Illinois**

In re Studio A Kitchen & Bath, Inc.

Debtor(s)

Case No.  
Chapter

7

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Studio A Kitchen & Bath, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☐ None [Check if applicable]

Date

6/6/23

  
\_\_\_\_\_  
Julia Jensen Smolka 6272466

Signature of Attorney or Litigant

Counsel for Studio A Kitchen & Bath, Inc.

Robbins DiMonte, Ltd.

216 Higgins Road

Park Ridge, IL 60068

(847) 698-9600 Fax: (847) 698-9623